

## **Evaluation of the 2000 - 2001 U.S. Influenza Vaccine Distribution Delay**

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**Background:** An unprecedented national influenza vaccine distribution delay occurred during the 2000 - 2001 influenza season. In October 2000, the Advisory Committee on Immunization Practices (ACIP) recommended focusing early vaccination efforts on persons at high risk for influenza complications (all persons aged  $\geq 65$  years or anyone  $\geq 6$  months with a high risk condition) and health care workers. We conducted a rapid assessment of the impact of this recommendation on vaccine use in the United States.

**Methods:** In October 2000, questions regarding when influenza vaccine was received and reasons for not being vaccinated were added to the 2000-2001 FoodNet population survey, a monthly telephone survey used to assess rates of self-reported diarrhea and exposures associated with foodborne illness. Influenza vaccination data were analyzed by month of response because vaccine availability increased over time. Responses were stratified by the presence or absence of high risk conditions and by age group.

**Results:** Among 2333 persons interviewed in December or early January, 21% (484) reported vaccination. Among the vaccinated persons interviewed in December or early January, 46% of 323 high risk and 53% of 161 non-high risk persons reported receiving vaccine in November, with considerable proportions receiving vaccine in October or December/January. The timing of receipt of vaccine did not differ between high risk and non-high risk groups. Among unvaccinated respondents, significantly more high risk persons reported inability to find vaccine than non-high risk persons: 23% vs. 13% among those interviewed in October, 24% vs. 12% among those interviewed in November, and 17% vs. 10% among those interviewed in December.

**Conclusions:** The vaccine distribution delay posed a national challenge for maintaining influenza vaccine coverage of high risk persons. Although high risk respondents reported higher rates of vaccination, they did not receive vaccine earlier than vaccinated non-high risk persons, despite the modified ACIP recommendations. High risk respondents were more likely to report difficulty in obtaining vaccine as an obstacle for vaccination than non-high risk respondents.

### **Suggested citation:**

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